

SJA

187 Century Park East, Suite # 1050
Los Angeles, CA, 90067

RECEIVED
CENTRAL FAX CENTER

AUG 31 2004

urgent

f a c s i m i l e

To: Examiner Thompson

Fax Number: +1 (703) 8729306

From: Mani Adeli

Fax Number: (310) 785-9558

Business Phone: (310) 785-0140

Home Phone:

Pages: 22

Date/Time: 8/31/2004 8:27:29 AM

Subject: Amendment for 09/742,171

BEST AVAILABLE COPY

Attached is an Amendment for 09/742,171. A version of this Amendment was faxed last night. However, that version was not accompanied by the requisite petition for extension and time and required fee. The version faxed today is accompanied by the petition and the requisite fee.

Mani Adeli
310-785-0140x301

RECEIVED
SEP - 1 2004
DIPE/JCWS

RECEIVED
CENTRAL FAX CENTER
AUG 31 2004

CERTIFICATE OF TRANSMISSION	
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (703) 872-9306, on <u>8/31/04</u>	
<u>Mani Adeli</u>	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application for:

Steven Teig

Serial No.: 09/742,171

Filing Date: 12/19/2000

For: METHOD AND APPARATUS
FOR QUANTIFYING THE
QUALITY OF PLACEMENT
CONFIGURATIONS IN A
PARTITIONED REGION OF AN
INTEGRATED-CIRCUIT
LAYOUT

Examiner: Annette Thompson

Group Art Unit: 2825

BEST AVAILABLE COPY

TRANSMITTAL LETTER FOR RESPONSE TO AN OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In complete response to the Office Action dated 5/21/04, attached please find:

1. An Amendment. (A copy of this Amendment was faxed on 8/30/04 without the requisite Petition for Extension of Time and Credit Card Payment Form.)
2. A Petition for Extension of Time;
3. A Credit Card Payment Form is attached.

The fee has been calculated as follows:

FOR	NUMBER	NUMBER OVER ALLOTMENT	RATE	CALCULATIONS
ADDED CLAIMS	*	*	x \$18.00	\$*
ADDED INDEPENDENT CLAIMS	*	*	x \$86.00	
1 MONTH PETITION FOR EXTENSION FOR REPLY :				\$110.00
				TOTAL = \$110.00

The Assistant Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§ 1.16 and 1.17 that may be required by this transmittal and associated documents, or to credit any overpayment to Deposit Account No. 50-1128 referencing SPLX.P0017.

Respectfully submitted,

Dated: August 31, 2004

By:

Mani Adeli
Registration No. 39,585

Stattler, Johansen & Adeli LLP
PO Box 51860
Palo Alto, California 94303-0728
Telephone: (650) 752-0990, ext. 102
Facsimile: (650) 752-0995

RECEIVED
CENTRAL FAX CENTER

AUG 31 2004

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office,
Fax No. (703) 872-9306, on 8/31/04

Mani Adeli

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application for:

Steven Teig

Serial No.: 09/742,171

Filing Date: 12/19/2000

For: METHOD AND APPARATUS
FOR QUANTIFYING THE
QUALITY OF PLACEMENT
CONFIGURATIONS IN A
PARTITIONED REGION OF
AN INTEGRATED-CIRCUIT
LAYOUT

Examiner: Annette Thompson

Group Art Unit: 2825

AMENDMENT TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The following Amendment is submitted in response to the Office Action dated 05/21/04 and as a follow-up to the personal interview conducted with the Examiner on 8/16/04. Applicants previously faxed a copy of this Amendment without the extension of time fee. To rectify this mistake, Applicants are resubmitting this Amendment with the appropriate fee. Please amend the patent application as follows:

Amendment to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 12 of this paper.

-- 1 --

Attny Docket: SPLX.P0017
PTO Serial Number: 09/742,171

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- ☐ **BLACK BORDERS**
- ☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- ☒ **FADED TEXT OR DRAWING**
- ☒ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- ☐ **SKEWED/SLANTED IMAGES**
- ☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- ☐ **GRAY SCALE DOCUMENTS**
- ☐ **LINES OR MARKS ON ORIGINAL DOCUMENT**
- ☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- ☐ **OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.